

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Freedom and Security PAC

ADDRESS (number and street)

228 S. Washington St., Ste. 115

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00437061

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 01 2012

through

M M M / D D D / Y Y Y Y Y Y
08 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Lisker

Signature of Treasurer

Lisa Lisker

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 18 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Freedom and Security PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
08		01		2012

To:

M M	/	D D	/	Y Y Y Y Y
08		31		2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2012</td></tr></table>	Y	Y	Y	Y	Y	2012						<table><tr><td colspan="5">96435.08</td></tr></table>	96435.08				
Y	Y	Y	Y	Y													
2012																	
96435.08																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">38226.69</td></tr></table>	38226.69															
38226.69																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">13796.90</td></tr></table>	13796.90					<table><tr><td colspan="5">162835.80</td></tr></table>	162835.80									
13796.90																	
162835.80																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">52023.59</td></tr></table>	52023.59					<table><tr><td colspan="5">259270.88</td></tr></table>	259270.88									
52023.59																	
259270.88																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">5960.00</td></tr></table>	5960.00					<table><tr><td colspan="5">213207.29</td></tr></table>	213207.29									
5960.00																	
213207.29																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">46063.59</td></tr></table>	46063.59					<table><tr><td colspan="5">46063.59</td></tr></table>	46063.59									
46063.59																	
46063.59																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Freedom and Security PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 08 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y
 08 / 31 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7500.00

64000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7500.00

64000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

4000.00

87500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

11500.00

151500.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

9038.90

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

2296.90

2296.90

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

13796.90

162835.80

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

13796.90

162835.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	960.00	62707.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	960.00	62707.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	149500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5960.00	213207.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5960.00	213207.29

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11500.00	151500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11500.00	151500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	960.00	62707.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2296.90	2296.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	-1336.90	60410.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Freedom and Security PAC

Full Name (Last, First, Middle Initial)

A. Victor F. Klatt

Mailing Address 9020 Advantage Ct.

City State Zip Code
 Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Penn Hill Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
 08 / 06 / 2012

Transaction ID : SA11AI.6655

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Daniel Meyer

Mailing Address 2506 Duxbury Place

City State Zip Code
 Alexandria VA 22308

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Duberstein Group, Inc

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
 08 / 06 / 2012

Transaction ID : SA11AI.6653

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mark Perry

Mailing Address 3033 South Bridge Street

City State Zip Code
 Visalia CA 93277

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Enterprise

Occupation

General Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
 08 / 06 / 2012

Transaction ID : SA11AI.6651

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Freedom and Security PAC

A. Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

Mailing Address 1201 15TH STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 09 2012

Transaction ID : SA11C.6666

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

Mailing Address 1300 I St NW
Ste 400 West

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 21 2012

Transaction ID : SA11C.6665

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00

4000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Freedom and Security PAC

Full Name (Last, First, Middle Initial)

A. Kiawah Island Golf Resort

Mailing Address One Sanctuary Beach Dr.

City State Zip Code
 Kiawah Island SC 29455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2296.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 06 2012

Transaction ID : SA15.6649

Amount of Each Receipt this Period

2296.90

Vendor Refund of Overpayment

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2296.90

2296.90

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Freedom and Security PAC

Full Name (Last, First, Middle Initial)

A. 2nd 2Nung Consultants

Mailing Address 1117 Atwood Ct

City
Shakopee

State
MN

Zip Code
55379

Purpose of Disbursement
Fundraising Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 08 / 2012

Transaction ID : SB21B.6680

Amount of Each Disbursement this Period

960.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

960.00

960.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom and Security PAC

Full Name (Last, First, Middle Initial)

A. CHRIS FIELDS FOR CONGRESS

Mailing Address PO BOX 583611

City	State	Zip Code
MINNEAPOLIS	MN	55408

Purpose of Disbursement
Political Contribution

Candidate Name

CHRIS FIELDSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2012

Transaction ID : SB23.6668

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. HERNANDEZ FOR US CONGRESS CAMPAIGN COMMITTEE

Mailing Address PO BOX 40545

City	State	Zip Code
ST PAUL	MN	55104

Purpose of Disbursement
Political Contribution

Candidate Name

ANTHONY J HERNANDEZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2012

Transaction ID : SB23.6677

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. QUIST FOR CONGRESS

Mailing Address 38197 STATE HWY 22

City	State	Zip Code
ST PETER	MN	56082

Purpose of Disbursement
Political Contribution

Candidate Name

ALLEN QUISTOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2012

Transaction ID : SB23.6674

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Freedom and Security PAC

A. TEAM EMERSON FOR JO ANN EMERSON

400 BROADWAY, SUITE 501

City	State	Zip Code
CAPE GIRARDEAU	MO	63702

Transaction ID : SB23.6671

Purpose of Disbursement	Political Contribution

01:

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ President
 State: MO District: 08

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

B.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

5000.00